FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

PUT NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
IFORM LIMITED OFFERING EXEMPTION

366792

OMB APPROVAL

OMB Number:

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3235-0076

Expires:

Estimated average burden hours per response.....16.00



Name of Offering (check if this is an amendme	ent and name has changed, and indicate change.)	00038191
Filing Under (Check box(es) that apply): Rule Type of Filing: New Filing Amendment	e 504 Rule 505 Rule 506 Section 4(6)	ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	•	
Name of Issuer (check if this is an amendment	and name has changed, and indicate change.)	
Bigsupersearch.com, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
16654 Soledad Canyon Road, Suite 354, Can	yon Country, CA 91387	(661) 294-7780
Address of Principal Business Operations (if different from Executive Offices) Same	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business	***************************************	
Internet based search engine.		
		PROCESSED
	partnership, already formed other (please specify): JUN 2 2 2006
Actual or Estimated Date of Incorporation or Organiz Jurisdiction of Incorporation or Organization: (Enter CN		mated THOMSON FINANCIAL
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of secu 77d(6).	rities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 1 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United S	e date it is received by the SEC at the address given b	
Where To File: U.S. Securities and Exchange Comm	sission, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
Copies Required: Five (5) copies of this notice must photocopies of the manually signed copy or bear type		ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all thereto, the information requested in Part C, and any n not be filed with the SEC.	•	0. 2
Filing Fee: There is no federal filing fee.		
State:		
This notice shall be used to indicate reliance on the	Uniform Limited Offering Exemption (ULOE) for s	sales of securities in those states that have adopted

ATTENTION -

ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

this notice and must be completed.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. **Z** Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Fuller, Adrian Business or Residence Address (Number and Street, City, State, Zip Code) 16654 Soledad Canyon Road, Suite 354, Canyon Country, CA 91387 Check Box(es) that Apply: Beneficial Owner General and/or Promoter Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	a isyana		uar a light lid	ų.	B. IN	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								******	Yes	No □		
	Answer also in Appendix, Column 2, if filing under ULOE.									<u>~~</u>	[ne]		
2.										***************************************	\$ <u>10,</u>	00.00	
												Yes	No
3.			permit joint									X	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									he offering. with a state			
		Last name oductions,	first, if indi , Inc.	vidual)	-								
Bus	iness or I	Residence	Address (N	umber and	d Street, Ci	ty, State, Z	ip Code)						
			n Rd., #C,		CA 91350								
Nan	ne of Ass	ociated Br	oker or Dea	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		 				
	(Check '	"All States	or check	individual	States)	••••••	.,,,,,,,,,,			***************		☑ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ΙΝ	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (I	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of Ass	sociated Br	oker or Dea	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	"All States	" or check	individual	States)	•••••		••••••				☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Full			first, if indi										
	rvanie (2	2400 114110	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)		. 1				
Nan	ne of Ass	ociated Br	oker or Dea	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	"All States	s" or check	individual	States)	•••••	***************************************					☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
			IA	TZC	KY	LA	ME	MD	\overline{MA}	MI	MN	MS	MO
	IL MT	IN NE	NV	KS NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sum \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 1,000,000.00	§ 105,000.00
	Equity		
	Common Preferred	*	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	·	
	Other (Specify)		\$
	Total	\$ 1,000,000.00	
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	Ψ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$_90,000.00
	Non-accredited Investors	2	\$ <u>15,000.00</u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$_0.00

	and total expenses furnished in response to	egate offering price given in response to Part C — Part C — Question 4.a. This difference is the "ad	usted gross	s 1,000,000
5.	each of the purposes shown. If the smooth	I gross proceed to the issuer used or proposed to unit for any purpose is not known, furnish an es he total of the payments listed must equal the adjust to Part C — Question 4.5 above.	itimate and	
	•		Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ 75,000.00	5 70,000.00
		·/////////////////////////////////////		
	Purchase, rental or leasing and installational equipment	on of machinery	\$	\$
		gs and facilities		
	offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of enother	\$	s
	• •			
	Working capital	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u>	0_0 s
	Other (specify):		🗆 🕏	_ [] \$
			5	\$
	Column Totals		<u>\$930,0</u>	0 0 5 70,000,00
	Total Payments Listed (column totals ad	ded)	<u> </u>	1,000,000
sigi	ature constitutes an undertaking by the iss	ned by the undersigned duly authorized person. I there to furnish to the U.S. Securities and Exchange non-accredited investor pursuant to paragraph	ge Commission, upon write	ule 505, the following ten request of its staff,
İsa	er (Print or Type)	Signature /	Date	1
Bk	aupersearch.com, Inc.	COM SIL	_	2005
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Adri	an Fuller	President and CEO	•	

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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			200000000000000000000000000000000000000	
Ţ	Is any party described in 17 CFR 230,262 presently subject to any of the disqualification	Yes	No	
	provisions of such tule?			
	See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form
- D (17 CFR 237.500) at such times as required by state law.

 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

of this exemption has the burden of establishing that these conditions have been satisfied.

Issuer (Print or Type)	Signature /	Date
Bigsupersearch.com, Inc.	COMM ZI	11/8/2005
Name (Print or Type)	Title (Print or Type)	
Adrian Fuller	President and CEO	

Instruction:

issuer to offerees.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AI	PENDIX			59 (24 (3 mg))	
1	Intend to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK		×	Common	1	\$10,000.00				×
AZ									2204-00-00
AR									
CA	×		Common	8	\$50,000.00	2	\$15,000.00		×
СО									77000-201100-202-01-301-422-0
СТ									
DE		J. moone							
DC									
FL									
GA									
HI									
ID		***************************************							
IL		X	Common	3	\$20,000.00				×
IN	and the second and th								
IA		L							
KS								-	
KY		<u> </u>			-				
LA									
ME								777700000000000000000000000000000000000	
MD									
MA		<u></u>							
MI		<u></u>							393-147
MN									
MS									

APPENDIX 2 3 4 5 1 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Investors Yes No State Amount Amount MO MTNE NV× Common 1 X \$5,000.00 NH NJ × 1 Common \$5,000.00 NM NY NC ND OH OK OR PA RI SC SD TNTXUT VT VA WAWV

WI

APPENDIX										
1 2 3 Intend to sell and aggregate to non-accredited investors in State offered in state				4 Type of investor and amount purchased in State					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted)	
		-Item 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY									, , , , , , , , , , , , , , , , , , ,	
PR								ribane in control		